CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

RECEIVED eived City Clerk's Office



MAR 06 2013

Agency Name Carry of Cani west Division, Board, Department. District, if applicable If filing for multiple positions, list below or on an attachment. Agency: Cani west Succession Agency Jurisdiction of Office (Check at least one box) State Multi-County City of Gaziwssa Annual: The period covered is January 1, 2012, through December 31, 2012. The period covered is Jeren County Assuming Office: Date assumed Assuming Office: Date assumed Assuming Office: Date assumed Assuming Office: Date assumed Candidate: Election year and office sought, if different than Part 1: Total number of pages including this cover page: Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached Schedule D - Income - Gifts - schedule attached	
1. Office, Agency, or Court Agency Name CITY OF CINICESA Division, Board, Department. District, if applicable Vour Position Council Little To Council Filling for multiple positions, list below or on an attachment. Agency: CAN LINES A SECRESSON AGENCY Position: Brand More To Count Commissioner (Statewide Jurisdiction) State Judge or Court Commissioner (Statewide Jurisdiction) County of County of County of County of County of Annual: The period covered is January 1, 2012, through December 31, 2012. The period covered is January 1, 2012, through December 31, 2012. Assuming Office: Date assumed Assuming Office: Date assumed Assuming Office: Date assumed The period covered is January 1, 2012, through December 31, 2012. Assuming Office: Date assumed The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. The period covered is January 1, 2012, through the date of leaving office. Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached	
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If filing for multiple positions, list below or on an attachment. Agency: Chr. ws Successor Agency Position: Brand Ward	
If filing for multiple positions, list below or on an attachment. Agency Christian Successor Agency Position: Branch Member	
Position: Brank Memory 2. Jurisdiction of Office (Check at least one box) □ State □ Multi-County □ City of Courtes (Check at least one box) □ Other 3. Type of Statement (Check at least one box) □ December 31, 2012. □ Or □ The period covered is	
Position: Brank Memory 2. Jurisdiction of Office (Check at least one box) □ State □ Multi-County □ City of Courtes (Check at least one box) □ Other 3. Type of Statement (Check at least one box) □ December 31, 2012. □ Or □ The period covered is	
Agency: Charles Successor Agency Position: Brank Months 2. Jurisdiction of Office (Check at least one box) State Multi-County City of County of December 31, 2012. Or- The period covered is January 1, 2012, through December 31, 2012. Or- The period covered is/, through December 31, 2012. Or- The period covered is/, through December 31, 2012. Assuming Office: Date assumed/_ The period covered is/, through December 31, 2012. Assuming Office: Date assumed/_ The period covered is/, through The period covered is/, through December 31, 2012. Assuming Office: Date assumed/_ Through the date of leaving office. The period covered is/, through the date of leaving office. The period covered is/_, through the date of leaving office. The period covered i	
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State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County	
State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County	
Multi-County	
Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached Schedule D- Income - Gifts - Schedule Attached Schedule	
3. Type of Statement (Check at least one box) ✓ Annual: The period covered is January 1, 2012, through December 31, 2012. The period covered is	
Annual: The period covered is January 1, 2012, through December 31, 2012. -or- The period covered is	
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December 31, 2012. (Check one) The period covered is	
The period covered is	
Assuming Office: Date assumed	of
Candidate: Election year and office sought, if different than Part 1:	h
4. Schedule Summary Check applicable schedules or "None." ➤ Total number of pages including this cover page: Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached	
Check applicable schedules or "None." ➤ Total number of pages including this cover page: ➤ Schedule A-1 - Investments – schedule attached ➤ Schedule C - Income, Loans, & Business Positions – schedule attached ➤ Schedule D - Income – Gifts – schedule attached	
Schedule A-1 - Investments - schedule attached □ Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached □ Schedule D - Income - Gifts - schedule attached	
Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached	-
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[X] Cahadula B. Dool Droporty, cohodula attached. [V] Cahadula E. Incomo. Cific - Troyal Dayments, echadula attached	
Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached	ed .
-or-	
herein and in any attached schedules is true and complete. I ack	
I certify under penalty of perjury under the laws of the State	
Date Signed 3-6-2013	
Date Signed	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

CALIFORNIA FORM	/UU
FAIR POLITICAL PRACTICES CO	MMISSION
Name	
1 2 2	•
ELLA ZAMO	wie

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIONY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE \$2,000 - \$10,000
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other
Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
Comments:	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 70	
Name	
ELLA ZAMOWIE	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
EZ Success Training & Deveroper	EMT
Name P. o. Box 1184 Crimes A, Cr 92320 Address (Business Address Acceptable)	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2 ■ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Training - PEOPLE SKILLS	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000//_12/	\$2,000 - \$10,000/
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION OWNER PRESIDENT	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000 ☐ \$1,001 - \$10,000	\$500 - \$1,000 U OVER \$100,000 U \$1,001 - \$10,000
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 · \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000 / 12 / 12
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:_

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
ELLA ZAMOWICE	_

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 096 DESERT LAWA DAVE	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS CITY FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
Leasehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None
	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
☐ Guarantor, if applicable	Guarantor, if applicable
Comments:	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name Eura Zanowic	
7- 1 1. WOWIE	

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	
	ADDRESS (Business Address Acceptable)
1400 K STREET	
CITY AND STATE	CITY AND STATE
DACA MENTO, CA 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Abvocacy For Ciries & orlein pesisons	
DATE(S): 01 101 12 - 12 31 12 AMT: \$ 2, 168, 35	DATE(S):/
TYPE OF PAYMENT: (must check one) 🔲 Gift 💹 Income	TYPE OF PAYMENT: (must check one) Gift Income
Made a Speech/Participated in a Panel	☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description	Other - Provide Description
Traver, MEMS & Lodging For Volumes	<u></u>
SENVICES AS A WENEN OF BOARD OF DIE	rens
NAME OF SOURCE	► NAME OF SOURCE
RICHARD WASSON / GERSHOW	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
ADDRESS (Business Address Acceptable) 355 Seur A Grams ANE, 40th Fr	
CITY AND STATE	CITY AND STATE
hos Angeres Cs Business activity, if any, of source 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S): 01 161 12013 12/31/13 AMT: \$ 138,56	DATE(S):/
TYPE OF PAYMENT: (must check one) 🔀 Gift 🔲 Income	TYPE OF PAYMENT: (must check one) Gift Income
Made a Speech/Participated in a Panel	☐ Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
MEMS & HOUSING GIFT	
7	1
Comments:	•
Comments.	